



State of California Photography/Film Permit Application

California Film Commission
7080 Hollywood Boulevard, Suite 900
Hollywood, California 90028
Phone 323-860-2960 ext. 107
Buildings/Facilities Fax: 323-860-2972



Permit Category: Buildings/Facilities

Production Company/School Information:

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone: _____ Fax: _____

Project Information:

Title: _____

Type: ☐ Feature ☐ Commercial Budget: ☐ \$0 - \$50K ☐ \$5M - \$10M
☐ TV ☐ Music Video ☐ \$50K - \$100K ☐ \$10M - \$30M
☐ MOW ☐ Documentary ☐ \$100K - \$500K ☐ \$30M - \$50M
☐ Still ☐ Reality ☐ \$500K - \$5M ☐ over \$50M
☐ Student ☐ Other

Total Shoot Days: _____

Total Shoot Days in California: _____

Producer: _____ Phone: _____

Director: _____

Contact Information:

Contact Type: ☐ Location Manager/Scout ☐ Production Manager ☐ Other

Name: _____

Phone: _____ Fax: _____

Mobile/Cell: _____ Email: _____

Permit Service: (If a permit service is completing this application, please provide the information below.)

Company: _____ Contact Name: _____

Phone: _____ Fax: _____

Mobile/Cell: _____ Email: _____

Location Information: *(If application is for multiple locations, complete one page for each location.)*

Location #: _____

Shoot Dates:

	Start Date	End Date	Call Time (am/pm)	Wrap Time (am/pm)
Prep:	_____	_____	_____	_____
Shoot:	_____	_____	_____	_____
Strike:	_____	_____	_____	_____

Building or Facility Description:

Property Name: _____	
Address: _____	
City: _____	Zip Code: _____
Thomas Guide: Page: _____	Grid: _____

Personnel at this Location:

Number of Cast/Crew: _____
Number of Extras: _____

Vehicles and Parking:

Number of Vehicles:	
Cast/Crew Cars and Vans: _____	Trucks/Trailers/Motorhomes: _____
Cranes/Condors: _____	Generators: _____
Picture Cars: _____	Other: _____
Crew Parking: _____	
Street Parking: _____	
Add'l Parking: _____	
Base Camp: _____	

Additional Location Information:

Please use next page to record information about activities that will occur at this location.

Activity Information: *(If multiple activities occur at a location, complete this page for each activity.)***Location #** ____ (from Location Information Page)**Activity #** ____ (please number each activity sequentially for a specific location)

Activity Dates: Start: _____ End: _____

Activity Description: _____

Special Effects Information: *(The following activities may require a special pyrotechnics permit. To apply for a permit, contact the State Fire Marshal at (213) 700-5884.)***Check All That Apply:**☐ Aerial ☐ Animals ☐ Candles ☐ Explosion ☐ Fire Effects ☐ Gunfire☐ Open Campfire ☐ Propane ☐ Smoke ☐ Sparks ☐ Stunt☐ Tent over 200 Sq. Ft. ☐ Canopy over 400 Sq. Ft.

Effect Description: _____

Pyrotechnics Information: *(If this activity includes pyrotechnics, please provide the following information)*

Pyrotechnic Dates: Start: _____ End: _____

Pyrotechnic Activity Description: _____

FX Technician Name: _____

FX License # : _____ FX Technician Phone: _____

FX Technician Mobile/Cell: _____

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Photography/Motion Picture Permit Application
California Film Commission
Terms and Conditions

Indemnification: Permittee waives all claims against the state, its officers, agents and employees, for loss or damages caused by, arising out of, or in any way connected with the exercise of this permit.

Permittee agrees to indemnify, defend and save harmless the state, its officers, agents and employees, from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the exercise of this permit, and from any and all claims and losses accruing or resulting to any person, form or corporation who may be injured or damaged by Permittee in the exercise of this permit.

The State shall have the privilege of inspecting the premises covered by this permit at any or all times. This permit shall not be assigned.

The State may terminate this permit at any time if Permittee fails to perform any covenant herein contained at the time and in the manner herein provided. The State agrees it will not unreasonably exercise this right of termination.

The parties hereto agree that the Permittee, its officers, agents and employees in the performance of this permit, shall act in an independent capacity and not as officers, employees or agents of the State.

No alteration or variation of the terms of this permit shall be valid unless made in writing and signed by the parties hereto.

Permittee agrees to maintain all State required insurance, as set forth in the California Film Commission's insurance requirements.

Permittee will not discriminate against an employee or applicant for employment because of race, color, religion, ancestry, sex, age, national origin, or physical handicap.

Permittee agrees to comply with the terms and conditions contained in the attached exhibit(s), which terms and conditions are by the reference made a part thereof.

Permittee hereby agrees to comply with all the rules and regulations of the facility or institution subject to this permit. A copy of this permit is to be maintained at the location at all times during filming activities.

Representative signs upon issuance of permit.

Company representative signature

Date

Print name of representative

Title of representative